

496 Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER California Conservative PAC			Date of This Filing 10/29/2014	RECEIVED 496 INDEPENDENT EXPENDITURE REPORT Date Stamp 2014 OCT 30 AM 8:30 OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER (714) 404-6081	I.D. NUMBER (if applicable) 1347785		Report No. 5		
STREET ADDRESS 42 E Huntington Dr. #C-D			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Arcadia	STATE CA	ZIP CODE 91006-3222	No. of Pages 1		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Mike Toerge				NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD City Council Member: Newport Beach	DISTRICT NO.	SUPPORT	OPPOSE X	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/29/2014	Mail Piece Cumulative to date total \$4989.77	4,989.77

Reason for Amendment: _____